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Date: February 10, 2005

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From: Randi L. Karpinia REG. No. 46,148

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MESSAGE:

Enclosed herewith, please find the following document:

- Transmittal Form;
- RCE Form;
- Fee Transmittal (in duplicate); and
- Response to Final Rejection dated November 30, 2004.

| | |
|--------------------------------|----------------------------------|
| EXAMINER: | Chiang, Jack |
| ART UNIT: | 2642 |
| APPLICATION SERIAL NO.: | 10/071,938 |
| FILE DATE: | February 7, 2002 |
| INVENTOR(S): | Robert J. Mulligan et al. |
| Confirmation No. | 9852 |
| Docket No. | CM01562L |

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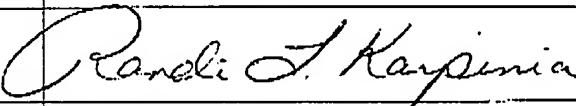
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February 10, 2005

| | | | | |
|--|----|------------------------|----------------------|--|
| TRANSMITTAL FORM <small>(to be used for all correspondence after initial filing)</small> | | Application Number | 10/071,938 | |
| | | Filing Date | 02/07/2002 | RECEIVED CENTRAL FAX CENTER |
| | | First Named Inventor | Robert John Mulligan | |
| | | Group Art Unit | 2642 | |
| | | Examiner Name | Chiang, Jack | |
| | | Confirmation No. | 9852 | |
| Total Number of Pages In this Submission | 12 | Attorney Docket Number | CM01562L | |

| ENCLOSURES (check all that apply) | | |
|--|---|--|
| <input checked="" type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/Declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Documents <input type="checkbox"/> Response to Missing Parts/ Incomplete Application <input type="checkbox"/> Response to Missing Parts Under 37 CFR 1.52 or 1.53 | <input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-Related papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation, Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CDs _____ | <input type="checkbox"/> After Allowance Communication to a Technology Center (TC) <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter with appropriate copies <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below) - RCE Transmittal |
| Remarks | | |

| SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT | | | |
|---|---|--|--------------------------|
| Firm or Individual | Randi L. Karpinia | | Registration No. 46, 148 |
| Signature |  | | |
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